PART B - FEE(S) TRANSMITTAL

Complete and this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or <u>Fax</u> (571) 273-2885

INSTRUCTIONS: This form should be used for tran	ismitting the ISSUE FEE and PUBLICATION	FEE (if required). Blocks 1 through 5 should be completed where
appropriate. All further correspondence including the	Patent, advance orders and notification of mainte	enance fees will be mailed to the current correspondence address as
indicated unless corrected below or directed otherwise	e in Block 1, by (a) specifying a new correspond	lence address; and/or (b) indicating a separate "FEE ADDRESS" for
maintenance fee notifications.	- 10	

AUG 15 2008

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of address)

28672

7590

05/12/2008

D. PETER HOCHBERG CO., L.P.A. 1940 EAST 6TH STREET CLEVELAND, OH 44114 Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

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Pamela Korzeniowski	(Depositor's name)
Bula la nemini.	(Signature)
Quant 12,2008	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/580,355 TITLE OF INVENTION:	05/23/2006	Geoffrey Charles Peck	EV4248US (#90753)	1738

SIFT-MS INSTRUMENTS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE PUBLICATION FEE		TOTAL	FEE(S) DUE	DATE DUE	
nonprovisional	YES	YES \$720.00		\$300.00	\$1020.00		08/12/2008
EXAM	MINER	ART UNI	Т	CLASS-SUBCLASS]		
Meenaksl	hi S. Sahu	2881		250-288000	_		
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).		(1) the na	nting on the patent front page, I ames of up to 3 registered pate		₁ D. Peter	Hochberg	
· Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.		or agents OR, alternatively, (2) the name of a single firm (having as a member a		2 Sean F. Mellino			
"Fee Address" indica PTO/SB/47; Rev 03-02 (Number is required.	tion (or "Fee Address" Indic or more recent) attached. Us	ation form e of a Customer			nes of up to	3 Daniel J.	. Smola

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE Syft Technologies Limited (B) RESIDENCE: (CITY and STATE OR COUNTRY) Middleton, Christchurch, New Zealand

a. The following fee(s) are enclosed:	4b. Payment of Fee(s):
X Issue Fee	· · · A check in the amount of the fee(s) is enclosed. (\$)
X Publication Fee (No small entity discount permitted)	X Payment by credit card. Form PTO-2038 is attached. (\$1,035.00)
X Advance Order - # of Copies5	X The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 08-2441 (enclose an extra copy of this form).
. Change in Entity Status (from status indicated above)	855
a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.	b. Applicant is no longer claiming SMAL STY status. See 37 CFR 1.27(g)(2).
The Director of the USPTO is requested to apply the Issue Fee and PubliOTE: The Issue Fee and Publication Fee (if required) will not be accenterest as shown by the records of the United States Patent and Tradem	lication Fee (if any) or to re-apply any previously pre
Authorized Signature	Date & august 11,2008
Typed or printed name D. Peter Hochberg	Registr & on No. 24,603

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AUG 15 2008

CURRENT CORRESPONDENCE ADDRES:	S (Note:	Use Block	l for any	change of	address
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05/12/2008

D. PETER HOCHBERG CO., L.P.A. 1940 EAST 6TH STREET CLEVELAND, OH 44114

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Pamela Korzeniowski	(Depositor's name)
Quela Viennini.	(Signature)
Quarist 12,2008	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO	CONFIRMATION NO.
10/580,355	05/23/2006	Geoffrey Charles Peck	EV4248US (#90753)	1738

SIFT-MS INSTRUMENTS

TITLE OF INVENTION:

APPLN, TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$720.00	\$300.00	\$1020.00	08/12/2008
EXAM	IINER	ART UNIT	CLASS-SUBCLASS]	
Meenaksh	ni S. Sahu	2881	250-288000	_	

- Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
 - · Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
 - · "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.
- 2. For printing on the patent front page, list
- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
- 1 D. Peter Hochberg
- 2 Sean F. Mellino
- 3 Daniel J. Smola

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE Syft Technologies Limited (B) RESIDENCE: (CITY and STATE OR COUNTRY) Middleton, Christchurch, New Zealand

4a. The following fee(s) are enclosed:	4b. Payment of Fee(s):
X Issue Fee	· · · A check in the amount of the fee(s) is enclosed. (\$)
X Publication Fee (No small entity discount permitted)	X Payment by credit card. Form PTO-2038 is attached. (\$1,035.00)
X Advance Order - # of Copies5	X ·The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number <u>08-2441</u> (enclose an extra copy of this form).
5. Change in Entity Status (from status indicated above)	
· a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.	b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).
The Director of the USPTO is requested to apply the Issue Fee and Pub NOTE: The Issue Fee and Publication Fee (if required) will not be accessinterest as shown by the records of the United States Patent and Traden	dication Fee (if any) or to re-apply any previously paid issue fee to the application identified above, apted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in hark Office.
Authorized Signature	Date August 11,2008

an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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PTO/SB/21 (11-07)

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	Application Nu	mber 10/580,35	
TRANSMITTAL	Filing Date	05/23/200	Charles Peck
FORM	First Named In	Geoffrey G	Charles Peck A 2008 3
	Art Unit	2881	The State of the S
(to be used for all correspondence after initial		Meenaksh	i S. Sahu
Total Number of Pages in This Submission	6 Attorney Dock	et Number EV4248U	S (#90753)
<u> </u>	ENCLOSURES	(Check all that apply)	· · · · · · · · · · · · · · · · · · ·
X Fee Transmittal Form	Drawing(s)		After Allowance Communication to TC Appeal Communication to Board
X Fee Attached	Licensing-related	Papers	of Appeals and Interferences
(credit card form) Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53	Terminal Disclair Request for Refu CD, Number of C Landscape Remarks	cation y, Revocation spondence Address ner Ind CD(s) Table on CD	Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below): TOL-85 / RETURN POST CARD t any overpayment to Deposit
Activities and an activities of the control of the	e e		
	TURE OF APPLICA	NT, ATTORNEY, OR	AGENT
Firm Name D. Peter Hochberg C	o., L.P.A.		
Signature D D H			
Printed name			

CERTIFICATE OF TRANSMISSION/MAILING

Reg. No.

24,603

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature

Typed or printed name

Date

Louela Logereur

D. Peter Hochberg

Pamela Korzeniowski

Date Chart 12

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Effective on 12/08/2004. Complete if Known Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). 10/580,355 **Application Number TRANSMITTAL** Filing Date 05/23/2006 For FY 2008 First Named Inventor Geoffrey Charles Peol **Examiner Name** Meenakshi S. Sahu X Applicant claims small entity status. See 37 CFR 1.27 Art Unit 2881 **TOTAL AMOUNT OF PAYMENT** (\$)1.035.00 XXXXX EV4248US (#90753) Attorney Docket No. METHOD OF PAYMENT (check all that apply) Check | X Credit Card Money Order None Other (please identify): X Deposit Account Deposit Account Number:_ 08-2441 Deposit Account Name: D. Peter Hochberg Co., L.P.A. For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES **EXAMINATION FEES Small Entity Small Entity Small Entity Application Type** Fee (\$) Fees Paid (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Utility 310 210 155 510 105 255 Design 210 105 100 50 130 65 Plant 210 105 310 160 155 80 Reissue 310 155 510 620 255 310 Provisional 210 105 0 0 0 Small Entity 2. EXCESS CLAIM FEES **Fee Description** Fee (\$) Fee (\$) Each claim over 20 (including Reissues) 50 25 210 105

Each independent claim over 3 (including Reissues) Multiple dependent claims

Total Claims Multiple Dependent Claims Extra Claims Fee Paid (\$) Fee (\$) - 20 or HP = Fee (\$) HP = highest number of total claims paid for, if greater than 20. **Extra Claims** Fee (\$) Fee Paid (\$)

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Number of each additional 50 or fraction thereof Total Sheets Extra Sheets Fee (\$) -100 =(round up to a whole number) x 0.00 Fees Paid (\$)

4. OTHER FEE(S)

NOW PROBLEM SHOW THE CODIES

Other (e.g., late filing surcharge): Small entity issue fee and publication fee

SUBMITTED BY					
Signature	D) Blother	Registration N (Attorney/Agent)	7/1 6114	Telephone	216.771.3800
Name (Print/Type)	D. Peter Hochberg			Date Chyp	WH 2008

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL		Complete if Known		
		Application Number	10/580,355	A IO
FEE IKAN	ISMIIIAL	Filing Date	05/23/2006	
For FY 2008		First Named Inventor	Geoffrey Charles Peck 3	AUG 15 700
X Applicant claims small entity status. See 37 CFR 1.27		Examiner Name	Meenakshi S. Sahu	\ \frac{1.5 \cdot 200}{200}
		Art Unit	2881	The second
TOTAL AMOUNT OF PAYMENT	(\$)1,035.00 X0X0X	Attorney Docket No.	EV4248US (#90753)	THE REST OF THE PARTY OF THE PA
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METHOD OF PAYMENT (check all that apply)							
Check X Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: 08-2441 Deposit Account Name: D. Peter Hochberg Co., L.P.A. For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)							
Charge fee(s) indicated be	elow .		Char	re fee(s) indic	ated below ex	cept for the filing fee
	•	(s) or underpayme	ents of fee(s				cept for the ming fee
Charge any additional fee(s) or underpayments of fee(s) Under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.							
FEE CALCULATION							
BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES EX Small Entity Small Entity				TION FEES			
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)
Utility	310	155	510	255	210	105	
Design	210	105	100	50	130	65	-
Plant	210	105	310	155	160	80	·
Reissue	310	155	510	255	620	310	
Provisional	210	105	0	0	0	0	
2. EXCESS CLAIM FEES Fee Description Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Multiple dependent claims Small Entity Fee (\$) Fee (\$) 25 25 370 185							Fee (\$) 25
Total Claims Extra Claims Fee (\$)		Fee Pa	aid (\$)			pendent Claims	
- 20 or HP =		_ x	_=			Fee (\$)	Fee Paid (\$)
HP = highest number of tota Indep. Claims - 3 or HP =	Extra Clain	<u>rs Fee (\$)</u> x	Fee Pa	aid (\$)		· ·	
HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50							
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) - 100 = / 50 = (round up to a whole number) x = 0.00							
4. OTHER FEE(S) **NONTRAGUENTAPPOCATIONNAXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX							
Other (e.g., late filing surcharge): Small entity issue fee and publication fee 1,020.00							

SUBMITTED BY					
Signature	1) Bet fle	Registration No. (Attorney/Agent)	24,603	Telephone	216.771.3800
Name (Print/Type) D. Peter Hochberg				Date Chyp	MI. 2008

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